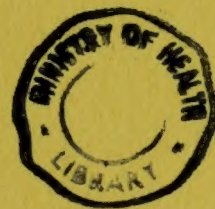


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THE
URBAN DISTRICT COUNCIL
OF SHERINGHAM



A N N U A L R E P O R T
of the
M E D I C A L O F F I C E R O F H E A L T H
to which is appended
THE REPORT OF THE
P U B L I C H E A L T H I N S P E C T O R

1 9 6 0

THE
URBAN DISTRICT COUNCIL
OF SHERINGHAM

PUBLIC HEALTH COMMITTEE

1960

Chairman

Mr. Councillor H. C. Bishop.

Vice-Chairman

Mr. Councillor H. J. Child.

Mr. Councillor A. E. Hamlin.

Mr. Councillor A. O. Harvey.

Mr. Councillor W.W.S. Hunt.
(to April, 1960)

Councillor Miss G. C. Huntley.

Mr. Councillor J. H. Pegg.

Councillor The Reverend L.G. Sturman.
(from May, 1960)

Mr. Councillor A.L.F. Temple.

Mr. Councillor J.H.V. Wilson.

P. G. Holt, M.B., Ch.B., D.P.H.
Medical Officer of Health.

R. H. Sershall,
Cert. R.S.I. & S.I.E.B., M.A.P.H.I.,
Cert. R.S.I. Meat and Food Inspector,
Surveyor and Public Health Inspector.

THE URBAN DISTRICT COUNCIL OF SHERINGHAM

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE
YEAR ENDED 31ST. DECEMBER, 1960.

To the Chairman and Members of
The Urban District Council of Sheringham.

I have the honour to submit my Annual Report on the health of the area for the Year 1960. That the area is a healthy one is shown by the fact that the death rate, when corrected for age and sex of the local population, is below average. The absence of serious epidemic disease is also noteworthy, though the same cannot be said of trivial virus infections which are prevalent and have a high nuisance value. These infections, which produce such symptoms as diarrhoea and vomiting, sore throats, fevers, etc., are one of the public health problems which still have to be solved, though there is little hope of a solution in the foreseeable future.

I would like to express my thanks to the Public Health Committee for their support, to the Officials of the Council for their co-operation, and to the staff of the Local Health Office for their invaluable help in the compilation of this Report.

Topography.

The Urban District of Sheringham is situated on the North Coast of Norfolk, in a region of wide open heaths, bounded to the North of the Town by the North Sea and to the South by a low range of wooded hills. It adjoins the Erpingham Rural District on three sides and has on its outskirts such picturesque places as the Roman Camp, Pretty Corner and the village of Upper Sheringham.

During the Summer months the resident population is greatly increased by an influx of visitors resorting to Sheringham for the bracing air, fine sands, golf links and scenery. It is one of the driest places in the British Isles as the air is extremely dry and bracing and consequently is highly recommended as a health resort.

The fishing industry in Sheringham still flourishes and is particularly well known for the excellence of its crabs and lobsters, although this industry is now largely superseded by the town's rapid development as a holiday centre and the increasing class who resort to Sheringham for its natural beauties and facilities.

General Statistics.

Area in acres.....	929.
Population (Estimated).....	4,660.
Number of inhabited houses	1,754.
Total Rateable Value.....	£72,399.
Product of a Penny Rate..	£292. 10. 11.

VITAL STATISTICS

BIRTHS

		<u>M</u>	<u>F</u>	<u>Total</u>
<u>Live Births.</u>	Legitimate	41	34	75
	Illegitimate	<u>2</u>	<u>1</u>	<u>3</u>
		<u>43</u>	<u>35</u>	<u>78</u>

Live birth rate per 1,000 of the estimated population	17.6
Corrected (comparability factor 1.27)	22.35
National rate	17.1

This is a considerable increase over last year's birth rate of 14.8. The National average has also increased by 0.6. Illegitimate births represent a rate of 3.8% of the total.

Still Births. There was just one male still birth, (the same as last Year), which gives a rate of 12.6 per 1,000 births; the National figure is 19.7, the lowest ever recorded. Thus the satisfactory position is maintained.

Infant Mortality. There was just one death of a female infant under 1 Year of age, and this occurred in the first week of life. This gives us an infant mortality of 12.8 per 1,000 births compared with the National figure of 21.7 (the lowest ever). It is interesting also to compare this latter figure with that of only 10 Years ago (1950 - 29.6) to see what steady progress is being made in this field.

DEATHS. The following causes of death are classified under the 36 headings based on the Abbreviated List of the International Statistical Classification of Diseases, Injuries or Causes of Death, 1955:-

			<u>M</u>	<u>F</u>	<u>Total</u>
Tuberculosis, respiratory	...	...	-	-	-
Tuberculosis, other	...	...	-	-	-
Syphilitic disease	...	...	-	-	-
Diphtheria	...	...	-	-	-
Whooping Cough	...	...	-	-	-
Meningococcal infections	...	...	-	-	-
Acute Poliomyelitis	...	...	-	-	-
Measles	...	...	-	-	-
Other infective and parasitic diseases	...	...	-	-	-
Malignant neoplasm, stomach	...	...	1	1	2
Malignant neoplasm, lung, bronchus	...	...	3	-	3
Malignant neoplasm, breast	...	...	-	2	2
Malignant neoplasm, uterus	...	...	-	-	-
Other malignant and lymphatic neoplasms	...	...	3	5	8
Leukaemia, aleukaemia	...	...	-	-	-
Diabetes	...	...	-	-	-
Vascular lesions of nervous system	...	...	2	8	10
Coronary disease, angina	...	...	8	6	14
Hypertension with heart disease	...	...	2	1	3
Other heart disease	...	...	9	9	18
Other circulatory disease	...	...	1	-	1
Influenza	...	...	-	-	-
Pneumonia	...	...	2	-	2
Bronchitis	...	...	1	-	1
Other diseases of respiratory system	...	...	-	-	-
Ulcer of stomach and duodenum	...	...	-	-	-
Gastritis, enteritis and diarrhoea	...	...	1	-	1
Nephritis and nephrosis	...	...	-	-	-
Hyperplasia of prostate	...	...	1	-	1
Pregnancy, childbirth, abortion	...	...	-	-	-
Congenital malformations	...	...	-	-	-
Other defined and ill-defined diseases	...	...	1	2	3
Motor vehicle accidents	...	...	1	1	2
All other accidents	...	...	-	-	-
Suicide	...	...	-	1	1
Homicide and operations of War	...	...	-	-	-
			<u>36</u>	<u>36</u>	<u>72</u>

VITAL STATISTICS (Continued)

Causes of Death (Continued).

The total number of deaths was slightly more than last Year (65). but is still below average when corrected for age and sex of the population. Disease of the heart and circulation accounted for nearly half of all deaths, while cancer was responsible for just over 25%. Once again there were no deaths from any infectious disease or maternal causes.

Death Rate per 1,000 of the estimated population for the last four Years:-

<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>
13.2	18.3	14.0	15.9

Corrected death rate for 1960 - 10.3
Death rate (England and Wales.) - 11.5

INFECTIOUS DISEASE

Notifications received during the Year are tabulated below:-

Disease	Age Unknown	Under 1	1-2	3-4	5-9	10-14	15-24	25+	Total
Whooping Cough	-	-	1	-	3	2	-	-	6
Measles	-	-	1	6	16	2	-	-	25
Sonne Dysentery	-	-	-	-	1	-	-	-	1
Pulmonary T.B.	-	-	-	-	-	-	-	2	2
Erysipelas	-	-	-	-	-	-	-	1	1
Total	-	-	2	6	20	4	-	3	35

Tuberculosis

There were 2 new cases of Pulmonary Tuberculosis notified, the same number as for 1959. There were no inward transfers, i.e. persons with Tuberculosis who have come to live in the district, and the total number of cases on the Tuberculosis register at the end of the Year stood at 39.

	Pulmonary		Non-Pulmonary		Total
	Males	Females	Males	Females	
New cases	2	-	-	-	2
Inward transfers	-	-	-	-	-
No. of cases on Register at 31. 12. 1960	15	20	-	4	39

INFECTIOUS DISEASE (Continued).

Poliomyelitis

Sheringham has been singularly fortunate in that the last case of poliomyelitis notified was in 1957. It does not follow, however, that this good record will be continued and it is vitally important that a high level of immunity be maintained in the local population. Poliomyelitis used to be called "infantile paralysis" because it attacked young children only, but in recent years its characteristics have altered and now older children and young adults are particularly liable to be victims of the disease. The number of children who have been immunized against the disease is quite high, but the position amongst young adults is not nearly so satisfactory. It would appear that we care more for our children than for ourselves, which is very noble of us, but also rather foolish.

The number of persons vaccinated against the disease during 1960 is as shown below:-

Age	Under 1	1	2	3	4	5	6	7	8	9	10	11
Received two injections	20	204	33	5	7	11	10	13	9	10	13	8
Received third injections	-	102	157	34	30	23	28	23	29	26	23	19

12	13	14	15-25	26-40	Others	Total
11	5	8	90	291	78	826
33	17	34	862	149	49	1,638

The total number of persons in Area No. 2 who had received three injections at any time up to 31st. December, 1960, was as follows:-

Children born 1956-60	-	845
do. 1943-55	-	3,259
Persons born 1933-42	-	1,139
Persons born before 1933		
and under 40 Years of age	-	313
Others	-	85
		<u>5,641</u>

These figures relate to the Administrative Area No. 2 of Norfolk County Council, as separate figures for Sheringham are not available.

Diphtheria, Whooping Cough and Tetanus.

Immunisation against diphtheria is now usually combined with that against Whooping Cough and Tetanus so as to reduce the total number of injections required. These injections are best given early in infancy so as to protect against Whooping Cough, which is so dangerous when contracted by a baby. It does not necessarily prevent a child from developing the disease altogether, but it does considerably reduce the severity of the illness, so much so that in many cases Whooping Cough is never suspected or diagnosed.

/It is.

Diphtheria, Whooping Cough and Tetanus.(Continued).

It is most gratifying to record a substantial increase in the numbers immunized from 252 in 1959 to 456 in 1960. Diphtheria is only kept at bay by maintaining a high level of immunity in the local population, and if that falls below a certain level, outbreaks of the disease are likely to occur. This has happened in one or two places recently and is a tragedy which should not occur when prevention is so easy.

The increase in numbers of those who have received a booster injection from 11 to 383 reflects the beginning of a campaign to bring up to date all the immunisation states of the school children in the district and to combine this with immunisation against Tetanus where required.

1960

Diphtheria Immunisation
Area No. 2.

Age at 31.12.60 i.e. born in Year	- 1 1960	1 1959	2 1958	3 1957	4 1956	5 1955	6 1954	7 1953	8 1952	9 1951	10 1950	11 1949	12 1948	13 1947	14 1946	Total under 15 Years
Total immun- ised during 1960	99	206	54	25	17	8	13	9	10	7	4	2	2	-	-	456
Ditto - Booster	-	-	3	-	18	41	58	59	66	48	55	28	3	3	1	383
Total immun- ised at any time between 1946-1960	99	271	220	272	257	268	292	356	335	232	261	374	349	375	283	4244
Ditto Booster	-	-	3	1	18	42	61	69	76	56	100	159	172	287	277	1321

The various antigens used were as follows:-

Triple Antigen (Diphtheria/Pertussis/Tetanus)	=	424
Combined Antigen (Diphtheria/Tetanus)	=	31
Single Antigen (Diphtheria only)	=	<u>1</u>
		<u>456</u>

TETANUS IMMUNISATION - A Total of 399 children under 15 Years of age and 479 persons over the age of 15 Years were inoculated during the Year with tetanus toxoid and a further 43 received a booster injection. Thus, by including those inoculated with triple or combined antigen, a grant total of 1376 persons of all ages received protection against tetanus during 1960.

SMALLPOX VACCINATION.

The following table relates to persons vaccinated in Area No. 2 during 1960:-

Age at date of vaccination	Under 1	1	2	3	4	5-14	15 & Over	Total
Primary	278	9	1	3	2	7	24	324
Re-vaccination	-	2	1	2	3	21	102	131

There is a considerable increase in the numbers vaccinated this Year despite the publicity given to the other immunisation procedures. Vaccination against smallpox is still important for two reasons. Firstly, it is the only means of protection against this highly infectious and serious disease. Although there is no reservoir of infection in this Country, cases are occasionally imported from abroad and with the increasing use of fast aircraft, the chances of the disease being introduced are greater.

The other reason is bound up with the international regulations requiring a person travelling abroad to have been vaccinated in the previous three Years. If vaccination had been carried out at an earlier age, then the re-vaccination required would not produce any constitutional disturbance or ill effects, but if primary vaccination is performed on an older child or adult, a severe reaction may occur. For this reason it is always strongly advisable for vaccination to be performed in the first two or three years of life. The procedure may then be repeated as often as necessary with impunity.

1. The purpose of this document is to provide information to the staff of the Department of Defense regarding the status of the program.

Item	1961	1962	1963	1964	1965	1966	1967	1968
1. Total	100	100	100	100	100	100	100	100
2. Subtotal	100	100	100	100	100	100	100	100

The purpose of this document is to provide information to the staff of the Department of Defense regarding the status of the program. The program is currently in the planning stage and is expected to be completed by the end of the year. The program is designed to provide information to the staff of the Department of Defense regarding the status of the program. The program is currently in the planning stage and is expected to be completed by the end of the year.

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GENERAL PROVISIONS OF THE HEALTH SERVICE

For the purpose of carrying out the service provided by the Norfolk County Council under the National Health Service Act of 1946, the Cromer Urban District, the Sheringham Urban District and the Erpingham Rural District are combined to form County Area No. 2. These services include midwifery, the care of mothers and young children, vaccination and immunisation, home nursing, mental health, prevention of illness, care and after care, home helps and the ambulance service.

Maternity and Child Welfare.

The town is served by an infant welfare clinic held twice a month at the Youth Centre, Norfolk Road. The domiciliary service is provided by a District Nurse/Midwife and a full time Health Visitor, both of whom are in attendance at the clinic, together with the Medical Officer.

All children under five are visited regularly in their homes by the Health Visitor, who takes over from the Midwife when the baby is two weeks old. Children of five years and over come under the supervision of the school nurse.

Vaccination and Immunisation.

This is carried out by the Assistant County Medical Officer and by the General Practitioners. Sessions for vaccination and immunisation against smallpox, diphtheria, whooping cough, tetanus and poliomyelitis are arranged at clinics, schools and General Practitioners' surgeries.

School Medical Service.

This takes up a considerable amount of time as every one of the 28 schools in the area is visited annually and on those occasions a full examination of all children in the appropriate age group is carried out. They are seen during their first year at school, at 10 Years and before leaving; if any defects are discovered, they are referred for treatment or investigation. Children in whom there is thought to be a need for supervision are seen every Year. Apart from the routine visits, many special visits to schools are made for such purposes as immunisation, mental ascertainment, examination when transport to school is believed necessary, and so on. The vision of all pupils is tested at eight years as a routine.

General Welfare.

These services are administered in the district by the Local Welfare Officer, who is in attendance and available for interview at:-

Sheringham U.D.C. Offices 2. - 2.30 p.m. Tuesday.

ENVIRONMENTAL HEALTH

It is gratifying to note that no cases of food-poisoning occurred during the Year. At the same time, one should never be complacent on the subject of food hygiene, as a small error or lack of care on the part of a food handler could easily produce a serious outbreak of food-poisoning. Some establishments are excellent in all respects, but in general there is a need for a new outlook on this subject, particularly with regard to the individual worker. Managements and supervisory staff tend to be content to tell their assistants what to do without making certain that the instructions are fully understood and carried out. There is also quite often failure on the individual's part to understand the reasons behind the precautions which are necessary.

If every manager or supervisor of premises where food is handled was to ensure that he or she was fully aware of the facts regarding food hygiene and would enthusiastically instruct and educate his or her staff, then I believe we would observe a very great improvement in the position. The public would also help by patronising only those premises where a high standard of hygiene was maintained; good hygiene would then be synonymous with good business.

Your obedient Servant,

P. G. HOLT.

M.B., Ch.B., D.P.H.

July, 1961.

(The Report of the Surveyor and Public Health Inspector)

(The Report of the Surveyor and Public Health Inspector)

- Town.

The water is derived:-

- in reservoirs.

- (b) From two deep wells sunk in chalk approximately 400 feet deep. The water is pumped into a reservoir at a higher level to supply by gravitation the high-lying parts of the Town.

- (i) (a) Quality of Water. - On behalf of the Eastern Gas Board, the Counties Public Health Laboratory carried out monthly bacteriological examinations and half-yearly chemical analysis of the treated water as supplied in this Urban District during the period under review, all of which proved to be of a very high standard of purity. Certificates giving the result of these bacteriological and chemical examinations are exhibited in the Showroom of the Eastern Gas Board's premises in Sheringham, for the perusal of the general public. Chlorine residue tests are carried out daily on the Spring and Well waters, both treated and untreated.

- (b) Quantity of Water. - The quantity of water supplied in the Urban District is sufficient for all purposes during dry weather. The quantity of water obtained from the various springs naturally varies a little during the Summer and dry weather, but the level of the water in the wells varies little however much it is pumped and has never shown signs of failing.

- (ii) The water supplied within the Urban District is not liable to plumbo-solvent action, as the p.H Reaction of the water is neutral or on the alkaline side of neutrality. All the water service pipes are laid on in galvanised wrought iron.

- (iii) No action has been found necessary in respect of any form of contamination of the water supply.

- | | | | | | | | |
|----------|---|-----|-----|-----|-----|-----|--------|
| (iv) (a) | Number of dwelling-houses supplied direct from public water mains | ... | ... | ... | ... | ... | 1,754. |
| | Number of population supplied from public water mains | | | | | | 4,660. |
| (b) | Number of dwelling-houses supplied by means of stand pipes | ... | ... | ... | ... | ... | 51. |
| | Number of population supplied by means of stand pipes | | | | | | 150. |

- excessive and sudden rainfall.

The Council's Consulting Engineers have submitted schemes for:-

- to replace the present defective and worn out Outfall pipe, and

/A.

A Ministry of Housing and Local Government Public Inquiry on the above schemes was held in Sheringham on the 5th. February, 1958, resulting in the Minister requiring further float tests in connection with scheme (a). Scheme (b) is to be held in abeyance until after the completion of scheme (a).

The Minister of Housing and Local Government agreed in December, 1960, that Tenders be sought for the construction of the Sea Outfall.

3. Rivers and Streams. - One stream runs through the Urban District and it has not been found necessary to take any action during the period to check pollution.
4. (a) Closet Accommodation. All houses, excepting three unfit houses, in the Urban District are connected to the sewer and have modern type water closets.
- (b) Public Cleansing. House refuse bins are emptied once weekly and two motor refuse collection vehicles are used in this service. It is found necessary in the Summer months to make twice weekly collections of refuse from boarding houses and hotels. House refuse is disposed of by the method of controlled tipping on a site on the outskirts of the District.
- (c) Schools. The Schools are of a modern type, the water supply and sanitary conditions being quite satisfactory.
- (d) Premises and Occupations Controlled by Bye-laws. There is no Common Lodging House of Offensive Trade in the Urban District.

SANITARY INSPECTION OF THE AREA

- (a) Inspections and Visits. The following inspections and visits have been carried out during the period:-

Sanitary routine inspections and re-visits	214.
Inspections and re-visits in connection with	
Housing Act procedure	57.
Slaughterhouse meat inspection visits	102.
Inspections and re-visits in connection with	
Discretionary and Standard Grants	57.
Drainage inspections and re-visits	117.
Food premises and food inspection visits	21.
Factory inspections	11.
Council houses inspections and re-visits	85.
Visits in connection with caravans and tents	27.
Visits in connection with refuse collection	19.
Rat and mice destruction inspections and re-visits	229.
Dirty premises inspections and re-visits	14.
Miscellaneous visits	69.
Inspections and re-visits in connection with	
Surveyor's general duties	248.

- (b) Action taken in consequence of inspections:-

Informal Notices served	20.
Statutory Notices served under the Public Health Acts...	Nil.

- (c) Result of Action taken in consequence of Notices served:-

Defects remedied by Informal Notices	18.
" " " Statutory Notices	Nil.
" " " Legal Proceedings	Nil.

(d) Proceedings under Section 16 and 17 of the Housing Act, 1957:-

Number of dwelling-houses in respect of which a Closing Order was made under Section 17 of the Housing Act, 1957	3.
Number of dwelling-houses in respect of which an Undertaking to make fit was accepted under Section 16 of the Housing Act, 1957	2.

(e) Summary of work carried out as a result of Formal and Informal Action:-

Defective drainage renewed	5.
Drainage unblocked and cleansed	7.
Water Closet pedestals renewed	4.
Sinks renewed	3.
Sink waste pipes renewed and trapped	3.
Roofs repaired	4.
Chimney stacks repaired or rebuilt	2.
Eaves guttering and downpipes repaired or renewed ...	4.
Windows repaired	5.
Doors repaired or renewed	3.
Wall and ceiling plaster repaired	7.
Firegrates repaired or renewed	4.
Floors repaired or renewed	5.
Water closets rebuilt	2.
Damp walls repaired and treated	6.
Dirty premises cleansed	3.

(f) Number of inspections and visits in connection with the duties of Surveyor:-

Number of Building Plans submitted for approval ...	82.
" " " " approved	82.
" " " " for houses and bungalows ...	11.
" " " " for conversions	8.
" " " " for additions and alterations	17.
" " " " for bathrooms	17.
" " " " for garages	16.
" " " " for factory extension ...	1.
" " " " for agricultural building ...	1.
* " " " for water closets	1.
" " " " for church hall	1.
" " " " for caravan sites	2.
Visits in connection with inspection of:-	
Foundations	21.
Damp proof courses	21.
General building byelaw inspections	178.
Number of drain tests carried out in new buildings ...	37.
Number of new houses erected during the period:-	
By the Local Authority	Nil.
By other persons	12.
Conversion of premises - in family units	15.
Number of applications for Discretionary Grants	1.
" " " " " " approved	1.
" " " " Standard Grants	8.
" " " " " " approved	7.

(g) Shops. - No action under this heading has been found necessary.

(h) Camping Sites. - There are no camping or caravan sites in the Urban District.

(i) Smoke Abatement. - No action under this heading has been found necessary.

The Commission on the Status of Women, established in 1946, was the first of its kind. It was created by the Economic and Social Council of the United Nations. The Commission's mandate was to promote gender equality and to coordinate the work of the United Nations in this field. It has since become a central body in the international system for women's rights.

Table 1. Membership of the Commission on the Status of Women, 1946-1999

Year	Members	Observers	Guests	Total
1946	18	0	0	18
1947	18	0	0	18
1948	18	0	0	18
1949	18	0	0	18
1950	18	0	0	18
1951	18	0	0	18
1952	18	0	0	18
1953	18	0	0	18
1954	18	0	0	18
1955	18	0	0	18
1956	18	0	0	18
1957	18	0	0	18
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1990	18	0	0	18
1991	18	0	0	18
1992	18	0	0	18
1993	18	0	0	18
1994	18	0	0	18
1995	18	0	0	18
1996	18	0	0	18
1997	18	0	0	18
1998	18	0	0	18
1999	18	0	0	18

Table 2. Membership of the Commission on the Status of Women, 2000-2009

Year	Members	Observers	Guests	Total
2000	18	0	0	18
2001	18	0	0	18
2002	18	0	0	18
2003	18	0	0	18
2004	18	0	0	18
2005	18	0	0	18
2006	18	0	0	18
2007	18	0	0	18
2008	18	0	0	18
2009	18	0	0	18

Table 3. Membership of the Commission on the Status of Women, 2010-2019

Year	Members	Observers	Guests	Total
2010	18	0	0	18
2011	18	0	0	18
2012	18	0	0	18
2013	18	0	0	18
2014	18	0	0	18
2015	18	0	0	18
2016	18	0	0	18
2017	18	0	0	18
2018	18	0	0	18
2019	18	0	0	18

The Commission on the Status of Women has played a crucial role in the advancement of women's rights. It has been instrumental in the development of international instruments, such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), and in the promotion of gender equality in various fields. The Commission's work has been recognized by the international community, and it continues to be a leading body in the field of women's rights.

- (j) Swimming Baths and Pools. - There are no swimming baths or pools open to the public in the Urban District.
- (k) Eradication of Bed Bugs. - No evidence has been found of bed bugs in this Urban District.

Inspection and Supervision of Food

- (a) Milk Supply. There are no milk producers or cowkeepers within the Urban District.

Number of retail purveyors	11.
" " Dealers' Licences to use the special designation "Tuberculin Tested" and "Pasteurised" milk	7.
Number of Dealers' Licences to use the special designation "Pasteurised" milk	4.
Number of Pasteuriser's Licences issued by the Norfolk County Council	1.

Sixty-seven samples of Pasteurised milk have been taken during the period by the Norfolk County Council Medical Officer's Department from the Sheringham premises and vehicles of East Coast Dairies Ltd., and all samples satisfied the prescribed tests.

Ice Cream. Twelve samples of Ice Cream were taken during the period from retailers in the Urban District and submitted to the Public Health Laboratory Service, Norwich, for bacteriological examination, resulting in all twelve samples being Provisional Grade I.

- (b) Adulteration, Chemical and Bacteriological Examination of Food. The appropriate Authority under this heading is the Norfolk County Council.
- (c) Nutrition. No special work in the dissemination of knowledge on this subject has been considered necessary.
- (d) Shellfish. No shellfish are gathered within the area of the Urban District.
- (e) Food Hygiene Regulations. Inspections of food premises in the Urban District have been made and it has been unnecessary to take any statutory or legal action in this matter.
- (f) Meat Inspection. There are eight butchers shops within the Urban District.

One Slaughterhouse is licensed in the Urban District, which is owned and used by a Sheringham butcher for the supply of meat to his retail business in the town. After consultation with all Sheringham butchers and organisations representing the interests concerned, as required under Section 3(1) of the Slaughterhouses Act, 1958, a "Report on Slaughterhouse Facilities" was submitted to the Minister of Agriculture, Fisheries and Food, giving the necessary information in detail of this particular slaughterhouse. The Minister has accepted this Report and appointed the 1st. July, 1962, as the day from which this slaughterhouse must comply with the Construction Regulations.

Two Sheringham butchers use a Slaughterhouse situate in the adjoining Rural District for their meat supply, the remainder purchase their meat from fresh meat wholesalers.

(f) Meat Inspection - (Continued).

A statement follows of the number of animals slaughtered, inspected and condemned in whole or part at the licensed Slaughterhouse in the Urban District:-

Carcases and Offal inspected and condemned in whole or in part.

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	159	-	4	209	311	-
Number inspected	159	-	4	209	311	-
<u>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcases of which some part or organ was condemned	16	-	-	-	6	-
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	10.06	-	-	-	1.93	-
<u>TUBERCULOSIS ONLY</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcases of which some part or or organ was condemned	-	-	-	-	11	-
Percentage of the number inspected affected with Tuberculosis	-	-	-	-	3.54	-
<u>CYSTICERCOSIS</u>						
Carcases of which some part or organ was condemned	-	-	-	-	-	-
Carcases submitted to treatment by refrigeration	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-

The total weight of carcase parts and organs condemned amounted to 312 lbs.

Attention is drawn to the absence of Tuberculosis in Cattle.

Factories Acts, 1937 and 1948. Eleven inspections have been made in connection with this heading. Two informal notices were served, requiring dirty premises to be cleansed and sink to be provided, which were complied with.

Your obedient Servant,

R.H. SERSHALL.

Cert.R.S.I. & S.I.E.B., M.A.P.H.I.
Cert.R.S.I. Meat and Food Inspector

Surveyor and Public Health
Inspector.

